Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| CLAIMS AS FILED - PART I   |  |                      |                                |                                     |                  |  |                                  |          | SMALL ENTITY       |                        |                | OTHER THA           |                        |  |
|--|--|----------------------|--------------------------------|-------------------------------------|------------------|--|----------------------------------|----------|--------------------|------------------------|----------------|---------------------|------------------------|--|
| FOR  |  |                      | (Column 1)                     |                                     |                  | (Column 2)                               |                                  |          | TYPE               |                        | OR             |                     | SMALL ENTITY           |  |
| run  |  |                      | NUMBER FILED                   |                                     |                  | NUMBER EXTRA                             |                                  |          | RATE               | FEE                    | 7              | RATE                | FEE                    |  |
| BASIC FEE  |  |                      |                                | 2                                   |                  |  | 160                              |          |                    | 345.00                 | OR             |                     | 690.00                 |  |
| TOTAL CLAIMS   |  |                      | 4                              | (O minus                            | 20=              | · H                                      |                                  |          | X\$ 9=             |                        | OR             | X\$18=              | 360.00                 |  |
| INI  | DEPENDENT C                                    | LAIMS                | // minus 3 =                   |                                     |                  | <u>* //</u>                              |                                  |          | X39=               |                        | OR             | X78=                | 858,00                 |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                      |                                |                                     |                  |  |                                  |          | .400               | <u> </u>               | 1              |                     | 1000                   |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                      |                                |                                     |                  |  |                                  | ' [      | +130=              | -                      | OR             |                     | 1000                   |  |
| CLAIMS AS AMENDED - PART II  |  |                      |                                |                                     |                  |  |                                  |          | TOTAL              |                        | OR             |                     | 1,908 a                |  |
| (Column 1) (Column 2) (Column 3)   |  |                      |                                |                                     |                  |  |                                  | SMALL    | ENTITY             | OR                     | OTHER<br>SMALL |                     |                        |  |
| AMENDMENT A  |  | REM<br>AF            | AINING<br>TER<br>IDMENT        |                                     | PR               | HIGHEST<br>NUMBER<br>EVIOUSLY<br>AID FOR | PRESENT<br>EXTRA                 |          | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | * 4                  | 4/                             | Minus                               | **               | 110                                      | = /                              |          | X\$ 9=             |                        | OR             | X\$18=              | #18                    |  |
| ¥  | Independent<br>FIRST PRESE                     | * /                  | Ž<br>N OF MI                   | Minus                               | PEND!            | FNT CLAIM                                | =                                |          | X39=               |                        | OR             | X78≃                |                        |  |
|  | <u> </u>                                       |                      |                                |                                     |                  |  |                                  |          | +130=              |                        | OR             | +260=               |                        |  |
|  |  |                      |                                |                                     |                  |  |                                  |          | TOTAL              |                        | OR             | TOTAL               | #18                    |  |
|  |  | (Colu                | ımn 1)                         |                                     | (Co              | olumn 2)                                 | (Column 3)                       | A        | DDIT. FEE          |                        |                | ADDIT. FEE          |                        |  |
| 8  |  |                      | AIMS                           | 40                                  | H                | IGHEST                                   |                                  | Г        |                    | ADDI-                  | 1 1            |                     | 4001                   |  |
| AMENDMENT E  |  | AF                   | AINING<br>TER<br>DMENT         | ā.                                  | PRE              | IUMBER<br>EVIOUSLY<br>AID FOR            | PRESENT<br>EXTRA                 | İ        | RATE               | TIONAL<br>FEE          |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *                    |                                | Minus                               | **               |  | =                                | T        | X\$ 9=             | ,                      | OR             | X\$18=              | rec_                   |  |
| \ME  | Independent                                    | <u> </u>             |                                | Minus                               | ***              |  | =                                | H        | X39=               |                        | 1 I            | X78=                |                        |  |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                      |                                |                                     |                  |  |                                  | F        | 700=               |                        | OR             |                     |                        |  |
|  |  | -                    |                                |                                     |                  |  |                                  | L        | +130=              |                        | OR             | +260=               |                        |  |
|  |  |                      |                                |                                     |                  |  |                                  | ΑC       | TOTAL<br>DDIT. FEE |                        | OR ,           | TOTAL<br>ADDIT. FEE |                        |  |
| -  |  |                      | mn 1)                          |                                     |                  | olumn 2)                                 | (Column 3)                       |          |                    |                        |                |                     |                        |  |
| AMENDMENT C  |  | REMA<br>AF           | AIMS<br>AINING<br>TER<br>DMENT | 10                                  | NI<br>PRE        | IGHEST<br>UMBER<br>EVIOUSLY<br>AID FOR   | PRESENT<br>EXTRA                 |          | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *                    |                                | Minus                               | **               |  | =                                |          | X\$ 9= ·           |                        |                | X\$18=              |                        |  |
|  | Independent                                    | *                    |                                | Minus                               | ***              |  | =                                | $\vdash$ |                    |                        | OR             |                     |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                      |                                |                                     |                  |  |                                  |          | X39=               |                        | OR             | X78=                |                        |  |
| * 15   | f the entry in colur                           | nn 1 is la           | ce than th                     | e ontre in est                      | mn C             | rito "O" : · ·                           |                                  |          | +130=              |                        | OR             | +260=               |                        |  |
| ***  | f the "Highest Nur<br>f the "Highest Nui       | nber Pre<br>mber Pre | viously Pa<br>viously Pa       | id For" IN THIS<br>iid For" IN THIS | S SPAC<br>S SPAC | E is less than<br>E is less than         | 20, enter "20."<br>3, enter "3." |          | TOTAL<br>DIT. FEE  |                        | OR A           | TOTAL<br>DDIT. FEE  |                        |  |
|  | The "Highest Num                               | iver Prev            | iousiy Paid                    | ı For" (Total or                    | Indene           | endent) is the                           | highest number                   | found    | t in the ann       | ropriate have          | بالممامل       |                     |                        |  |

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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09505621

## Total Fee Calculation

|                          |                    | 10(2) 1           | te Calculatio      | ) <b>C</b>  |             |             |
|--------------------------|--------------------|-------------------|--------------------|-------------|-------------|-------------|
|                          | For Cade           | Tacal<br># Clions | Soumber<br>Exten X | Fas         | Fee         | y Taral     |
|                          | Sm./Lg             |                   |                    | San Easty   | L: Exten    |             |
| Bude Filing Fee          | <u> 2017) ar</u> - |                   |                    | <del></del> |             | . 69000     |
| Taul Claim: >20          | 201/101            | 40 00             | . <u>20</u> x      | ·           | <del></del> | . 360a      |
| Independent Claim: >)    | 202/102            | 14 -;             | - <u>//</u> x      | <u> </u>    |             | . 8580      |
| Mult, Dap Claim Present  | 2047104            |                   |                    |             | <del></del> |             |
| Surchurge                | 205/10%            |                   |                    |             |             | . 1300      |
| English Translation      | 139                |                   |                    | <del></del> |             | <del></del> |
| TOTAL FEE CALCULA        | ,                  |                   |                    |             |             | 2.038.00    |
| Total Filing Fees Due    |                    | 2.03              | 28 D               |             |             |             |
| Less Filing Fees Subm    | ined - \$          | /                 |                    |             |             |             |
| BALANCE DUE              | =s<br>ndev         | 2,038             | (ce)               |             |             |             |
| Office of Initial Patent | Examination        | <del></del>       |                    |             |             |             |
|                          |                    | 1. :              | _                  |             | •           |             |

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)